

B 25C (Official Form 25C) (12/08)

UNITED STATES BANKRUPTCY COURT

District of Wyoming

In re Dennis Meyer Danzik,
Debtor

Case No. 17-20934

Small Business Case under Chapter 11

SMALL BUSINESS MONTHLY OPERATING REPORT

Month: March 2018

Date filed: 05/29/2018

Line of Business: Engineering and Design Consulting

NAISC Code: 541330

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY:


Original Signature of Responsible Party

Dennis M. Danzik

Printed Name of Responsible Party

Questionnaire: (All questions to be answered on behalf of the debtor.)

Yes No

- | | | |
|---|-------------------------------------|-------------------------------------|
| 1. IS THE BUSINESS STILL OPERATING? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. DID YOU PAY YOUR EMPLOYEES ON TIME? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUSTEE? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONALS THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSFERRED ANY ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUNT? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

B 25C (Official Form 25C) (12/08)

- | | | |
|---|--------------------------|-------------------------------------|
| 14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS? ☒ ☐

IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

(Exhibit A)

INCOME

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL INCOME \$ 34,020.00

SUMMARY OF CASH ON HAND

Cash on Hand at Start of Month \$ 7,281.00

Cash on Hand at End of Month \$ 70,365.91

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU TOTAL \$ 70,365.91

(Exhibit B)

EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL EXPENSES \$ 4,532.43

(Exhibit C)

CASH PROFIT

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B) \$ 34,020.00

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C) \$ 4,532.43

(Subtract Line C from Line B)

CASH PROFIT FOR THE MONTH \$ 29,487.57

B 25C (Official Form 25C) (12/08)

UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL PAYABLES \$ 4,866.09

(Exhibit D)

MONEY OWED TO YOU

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL RECEIVABLES \$ 43,340.00

(Exhibit E)

BANKING INFORMATION

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.

(Exhibit F)

EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED? 0

NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT? 0

PROFESSIONAL FEES

BANKRUPTCY RELATED:

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 0.00

NON-BANKRUPTCY RELATED:

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 0.00

B 25C (Official Form 25C) (12/08)

PROJECTIONS

COMPARE YOUR ACTUAL INCOME AND EXPENSES TO THE PROJECTIONS FOR THE FIRST 180 DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

	Projected	Actual	Difference
INCOME	\$ 30,000.00	\$ 34,020.00	\$ 4,020.00
EXPENSES	\$ 9,000.00	\$ 4,866.09	\$ 4,133.91
CASH PROFIT	\$ 21,000.00	\$ 29,153.91	\$ 8,153.91

TOTAL PROJECTED INCOME FOR THE NEXT MONTH:	\$ 30,000.00
TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH:	\$ 9,000.00
TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH:	\$ 21,000.00

ADDITIONAL INFORMATION

PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET WHICH YOU PREPARE INTERNALLY.

Period Ending March 31, 2018

DENNIS M. DANZIK

Case Number: 17-20934

Exhibit B - Monthly Operating Report

Cash and Income

DATE	INCOME RUNNING SHEET	NOTE	AMOUNT
	Source		
3/23/2018	Payment Received	1	\$ 60,000.00
1	Invoice Out - Client Contract 03		\$ 2,620.00
2	Invoice Out - Client Contract 01		\$ 31,400.00
3	Ending Cash		\$ 7,195.76
4	Wells Fargo Account		\$ 85.24
5	US Bank Debtor in Possession		\$ 63,084.91
	Total Earnings		\$ 34,020.00
	TOTAL		\$ 104,385.91
	RECEIVABLES		\$ 34,020.00

Period Ending March 31, 2018

Exhibit C - Monthly Operating Report

Expenses

DENNIS M. DANZIK

Case Number: 17-20934

DATE	EXPENSE RUNNING SHEET	NOTE	AMOUNT	PAYMENT	Credit Last 4
	Payee				
1 3/4/18	Credit Protect	Fee	\$ 0.93		2 9116
2 3/4/18	Late Fee	Fee	\$ 1.32		2 9116
3 3/4/18	Interest Charge on purchases	Fee	\$ 1.72		2 9116
4 3/4/18	Card Fee	Fee	\$ 4.95		2 2363
5 3/8/18	Automatic Payment	Payment	\$ 15.09	\$ 15.09	2 2363
6 3/8/18	Card Fee	Fee	\$ 4.95		2 0152
7 3/8/18	Audible	Book	\$ 16.14		2 9116
8 3/13/18	Late Payment Fee	Fee	\$ 27.00		2 3593
9 3/13/18	Interest Charge on purchases	Fee	\$ 3.03		2 3593
10 3/13/18	Payment Protection Plan	Fee	\$ 0.09		2 0152
11 3/13/18	Interest Charge on purchases	Fee	\$ 0.24		2 0152
12 3/23/18	Payment	Payment	\$ 100.00	\$ 100.00	2 3593
13 3/23/18	Payment reversal	Fee	\$ (100.00)		2 3593
14 3/28/18	IRS	Check 003	\$ 7,500.00	\$ 7,500.00	3 Tax
14 3/30/18	Shell oil	Fuel	\$ 72.06		2 3593
15 3/31/18	Estimated taxes	Tax	\$ 4,500.00		Tax
16 3/31/18	Bank Fee	Fee	\$ 10.00	\$ 10.00	6456
17 3/26/18	Visa	Payment	\$ 10.27	10.27	6190
					1 CASH
					2 CC
					3 Tax
	TOTAL		\$ 12,167.79	\$ 7,635.36	
	Balance Forward - This Month		\$ 4,532.43		

Period Ending March 31, 2018

DENNIS M. DANZIK

Case Number: 17-20934

Exhibit D - Monthly Operating Report

Unpaid Bills

	DATE	UNPAID BILLS	NOTE	AMOUNT
		Description		
1	3/31/18	Credit Card Ending 4447	Balance Due	\$ 142.59
2	3/31/18	Credit Card Ending 9948	Balance Due	\$ 30.78 CREDIT
3	3/31/18	Credit Card Ending 0152	Balance Due	\$ 10.27
4	3/31/18	Credit Card Ending 2363	Balance Due	\$ -
5	3/31/18	Credit Card Ending 3593	Balance Due	\$ 182.45
6	3/31/18	Credit Card Ending 6632	Balance Due	\$ -
7	3/31/18	Estimated taxes (current only)	Estimate	\$ 4,500.00
		TOTAL		\$ 4,866.09

Period Ending March 31, 2018

DENNIS M. DANZIK

Case Number: 17-20934

Exhibit E - Monthly Operating Report

Receivables

DATE	RECEIVABLES - Running Total and Collections	Client Code	NOTE	AMOUNT
	Description			
1 12/1/17	Invoice 17-12010022	1	Invoice	\$ 19,100.00
2 12/6/17	Invoice 17-12010023	4	Invoice	\$ 1,700.00
3 1/8/2018	Invoice 18-01010024	4	Invoice	\$ 2,600.00
4 1/31/2018	Invoice 18-01010025	1	Invoice	\$ 21,500.00
5 2/1/2018	Invoice 18-01010026	3	Invoice	\$ 150.00
6 2/28/2018	Invoice 18-01010027	1	Invoice	\$ 26,740.00
7 3/1/2018	Invoice 18-01010028	3	Invoice	\$ 150.00
8 3/31/2018	Invoice 18-01010029	1	Invoice	\$ 31,400.00
3/23/18	Payment Received	1	Payment	\$ 60,000.00
	TOTAL			\$ 43,340.00

Wells Fargo Everyday Checking

Account number: 456 ■ March 1, 2018 - March 31, 2018 ■ Page 1 of 3

WELLS
FARGO



DENNIS M DANZIK
1108 14TH ST
405
CODY WY 82414-3743

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-TO-WELLS (1-800-869-3557)

TTY: 1-800-877-4833

En español: 1-877-727-2932

華語 1-800-288-2288 (6 am to 7 pm PT, M-F)

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (038)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	<input checked="" type="checkbox"/>	Direct Deposit	<input type="checkbox"/>
Online Bill Pay	<input checked="" type="checkbox"/>	Auto Transfer/Payment	<input type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>	Overdraft Protection	<input type="checkbox"/>
Mobile Banking	<input checked="" type="checkbox"/>	Debit Card	<input type="checkbox"/>
My Spending Report	<input checked="" type="checkbox"/>	Overdraft Service	<input type="checkbox"/>

Activity summary

Beginning balance on 3/1	\$95.24
Deposits/Additions	0.00
Withdrawals/Subtractions	- 10.00
Ending balance on 3/31	\$85.24

Account number: 456

DENNIS M DANZIK

Arizona account terms and conditions apply

For Direct Deposit use
Routing Number (RTN): 122105278

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Account number: 56 ■ March 1, 2018 - March 31, 2018 ■ Page 2 of 3



Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
3/30		Monthly Service Fee		10.00	85.24
Ending balance on 3/31					85.24
Totals			\$0.00	\$10.00	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the Wells Fargo Account Fee and Information Schedule and Account Agreement applicable to your account (EasyPay Card Terms and Conditions for prepaid cards) or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 03/01/2018 - 03/31/2018	Standard monthly service fee \$10.00	You paid \$10.00
	Minimum required	This fee period
How to avoid the monthly service fee		
Have any ONE of the following account requirements		
• Minimum daily balance	\$1,500.00	\$95.24 <input type="checkbox"/>
• Total amount of qualifying direct deposits	\$500.00	\$0.00 <input type="checkbox"/>
• Total number of posted Wells Fargo Debit Card purchases and/or payments	10	0 <input type="checkbox"/>
• The fee is waived when the account is linked to a Wells Fargo Campus ATM or Campus Debit Card		

Monthly service fee discount(s) (applied when box is checked)

Age of primary account owner is 17 - 24 (\$5.00 discount) ☐

The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days. Transactions occurring after the last business day of the month will be included in your next fee period.

RC/RC



IMPORTANT ACCOUNT INFORMATION

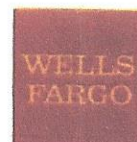
Important information about legal process fees.

The fee for legal order processing, which includes handling levies, writs, garnishments, and any other legal documents that require funds to be attached, remains \$125. However, effective 2/16/18, the bank will assess no more than two legal process fees per account, per calendar month. Please note, the calendar month may not coincide with your statement cycle.

Visit Wells Fargo Online Banking to track your progress toward avoiding the monthly service fee* with 10 posted debit card purchases/payments. Select Debit Card Activity on the Account Activity page in Wells Fargo Online Banking to see how many posted debit card purchases/payments have been made in the fee period, plus how many are still needed to avoid the monthly service fee.

*Available for Everyday Checking, Way2Save Checking and Opportunity Checking accounts.

Account number: 56 ■ March 1, 2018 - March 31, 2018 ■ Page 3 of 3



Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

- A** Enter the ending balance on this statement.

11/11/2016

- B** List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	\$

+ \$ 1

- C** Add **A** and **B** to calculate the subtotal.

100

- D** List outstanding checks, withdrawals, and other debits to your account that do not appear on this statement. Enter the total in the column to the right.

[illegible]

- \$ 1

- E** Subtract **D** from **C** to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register.

1

General statement policies for Wells Fargo Bank

- To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts.** You have the right to dispute the accuracy of information that Wells Fargo Bank, N.A. has furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

- **In case of errors or questions about your electronic transfers,** telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

5131 DUP S X IP01

Uni-Statement

Account Number:

6190

Statement Period:

Feb 13, 2018

through

Mar 31, 2018

Page 1 of 2

000007629 01 SP 0.470 106481520768013 P N
ESTATE OF DENNIS M DANZIK
DEBTOR IN POSSESSION
BANKRUPTCY CASE #17-20934
308 W 21ST ST
CHEYENNE WY 82001-3663



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

INFORMATION YOU SHOULD KNOW

Thank you for choosing U.S. Bank. We're committed to providing clear communications and would like to take this opportunity to inform you of some upcoming changes to your Easy Checking account, effective May 14, 2018.

Regarding your:	Current	New (as of May 14, 2018)
Extended Overdraft Fee	\$25.00 fee is charged on the 8th calendar day and <u>each week</u> thereafter if the available account balance remains below \$0.00.	\$36.00 fee is charged if the available account balance remains negative for seven consecutive calendar days; you will be charged \$36.00 on the eighth calendar day.
Overdraft Protection Transfer Fee	\$12.50 - Overdraft Protection Transfer Fee ¹ to a deposit account (U.S. Bank consumer savings account, money market or a secondary checking account) if a deposit account is set up as overdraft protection. <u>Fee remains as follows:</u> \$12.50 - Overdraft Protection Transfer Fee ¹ when transfers are made from a linked credit account (U.S. Bank Reserve Line, credit card, Premier Line, Home Equity Line of Credit, and/or other lines of credit).	\$0.00 - Overdraft Protection Transfer Fee ¹ when a transfer is made from a linked deposit account (U.S. Bank consumer savings account, money market or a secondary checking account).
Monthly Maintenance Fee	\$6.95 with eStatements \$8.95 with paper statements ² Requirement to waive the Monthly Maintenance Fee remains as follows: Combined monthly direct deposits totaling \$1,000.00+, OR Average account balance ³ of \$1,500.00.	\$6.95 If you are enrolled in paper statements ² , a \$2.00 Paper Statement Fee will be charged separately from the Monthly Maintenance Fee.
Cashier's Checks	Cashier's Checks - \$7.00	Cashier's Checks - \$8.00

¹ If you have linked eligible accounts, and the negative available balance in your checking account is \$5.01 or more, the advance amount will transfer in multiples of \$50.00. If however, the negative available balance is \$5.00 or less, the amount advanced will be \$5.00 and the Overdraft Protection Transfer Fee will be waived. Refer to *Your Deposit Account Agreement*, section titled Overdraft Protection Plans, for additional information.

² Additional fees for Statements with Check Images and Statements with Check Return. Check Images and Check Return is available only with paper statements. Accounts with the senior customer indicator receive \$1.00 discount per statement cycle for Statement with Check Return Fee and the Statement with Check Images is waived.

³ The average account balance for Easy Checking is calculated by adding the balance at the end of each calendar day in the statement period and dividing that sum by the total number of calendar days within the statement period.



Document Page 13 of 13
 ESTATE OF DENNIS M DANZIK
 DEBTOR IN POSSESSION
 BANKRUPTCY CASE #17-20934
 10632 N SCOTTSDALE RD # 722
 SCOTTSDALE AZ 85254-6164

Uni-Statement

Account Number:
 6190

Statement Period:
 Feb 13, 2018
 through
 Mar 31, 2018

Page 2 of 2

EASY CHECKING

U.S. Bank National Association

Account Summary

Beginning Balance on Feb 13	\$	100.00	Number of Days in Statement Period	47
Deposits / Credits		63,000.00	Average Account Balance	\$ 18,377.13
Other Withdrawals		25.36-		
Ending Balance on Mar 31, 2018	\$	63,074.64		

Member FDIC
 Account Number 6190

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Mar 23	Deposit	9255525938	\$ 63,000.00
Total Deposits / Credits			\$ 63,000.00

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Mar 9	Electronic Withdrawal REF=180680092392510N00	To FSB BLAZE 3420747941PAYMENT 518213010158236	\$ 15.09-
Mar 26	Electronic Withdrawal REF=180850050101380N00	To LEGACY VISA PYMT 1470535472PAYMENT 423980190052015	10.27-
Total Other Withdrawals			\$ 25.36-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Mar 9	84.91	Mar 23	63,084.91	Mar 26	63,074.64

Balances only appear for days reflecting change.